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## LLC REGISTERED AGENT CHANGE EARTHLINK SHARED SERVICES, LLC

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

, Na	ame of the limited liability company: EARTHLINK	SHAREDSERVIC	ES,LLC
(a)	•	(h)	
. (**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Nate: MAY BE POST OFFICE BOX)
	4001 Roduey Parham Rd., Little Rock AR 72212		
÷			
	1/3/2012		0000027
	Date of filing/registration in Florida	4.	Document number
. (a)	Registered Agent and Registered Office shown on the records		
	Registered Agent and Registered Office shown on the records  CorporationServiceCompany	of the Florida Dept. o	N N
	Registered Office Address MUST BE FLORIDA STREET	ET ADDRESS)	三
	1201HaysStreet		
	Tallahassee		TILL B. 52
(b)	Enter name of NEW Registered Agent and/or NEW Register		<b>6.</b>
	Enter name of NEW Registered Agent and/or NEW Register	red Office address:	92 52
	CTCorporationSystem		
	NEW Registered Office Address:		( <del></del>
	1200SouthPincIslandRoad		
	Plantation	FL 33324	
he cha gent v vas/wo	timited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of prganization or the operating agreement of	laws of the State of the registered of the liability company is of the limited lighther limited lighther limited liability	of Florida, it is hereby confirmed that after office and the business office of the register, it is hereby confirmed that the change(s) ability company or as otherwise provided in a company.
Signa	ture of a member or authorized representative of a member	Menssano	Printed or typed name of signee
-	by accept the appointment as registered agent and ions of all statutes relative to the proper and complications of my position as registered agent as provely reflect a change in the registered office address of inviting of this change.	agree to act in this ele performance o ided for in Chapte I hereby confirm	
71100			
otifie CTC	orporation System	James M. F	łalpin

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00